



UNICEF/ANG-2025/Ana Rita. In schools in the municipality of Sumbe, Seles and Quibala, in Kwanza Sul province, UNICEF works with the Provincial Education Office to distribute cholera materials to schools.

Angola HIGHLIGHTS

- Cholera cases saw a decrease in the month of November, despite the hotspots in Huíla and Uíge where the situation continues to be on alert.
- As of 30 November, a total of 35,451 cases and 880 deaths, thus a Case Fatality Rate (CFR) of 2.5 per cent, was reported. Out of 168 municipalities affected since the beginning of the year, 31 of them continue to report cases.
- In Uíge, UNICEF-trained community mobilisers remained central to the intervention. An average of 566 mobilizers were active, visiting 23,789 households and reaching 86,124 people with cholera prevention messages.
- A surge in cholera cases was reported in Malanje province, in Xandel municipality, as well as in Malanje municipality. UNICEF reacted swiftly by deploying WASH personnel to support local authorities and the Rapid Response Team in containing the outbreak.
- UNICEF-supported communication through local media played a critical role in disseminating prevention messages. Rádio Uíge broadcast educational spots three times per hour and daily cholera segments, reaching an estimated audience of 200,000 across the whole province. Public Angolan Television Uíge ensured daily visibility of the outbreak through live reports and high-audience programmes, contributing to broad public exposure to prevention guidance.
- Community mobilisation remained central to the intervention. An average of 566 mobilizers were active, visiting 23,789 households and reaching 86,124 people with cholera prevention messages. Despite these efforts, low-risk perception among families and persistent sanitation challenges continue to sustain the risk of transmission across multiple neighbourhoods.

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Humanitarian Situation Report No. 14

Reporting Period

03 November 2025

02 December 2025

Situation in Numbers



1,319,470

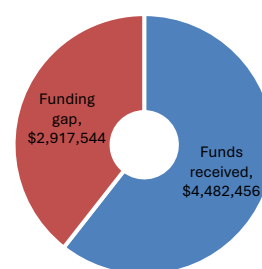
Children in need of humanitarian assistance



2,587,200

People in need of humanitarian assistance

Funding status (in US\$)
US\$ 7,400,000 million



Overview and Partnership

Since the beginning of the outbreak, UNICEF has financed the response with a mix of internal and external resources. Immediately after the onset, internal resources have been reprogrammed and used to activate the immediate response. Since then UNICEF managed to secure critical funding from ECHO, CERF, UNICEF's Emergency Programme Fund (EPF), the Church of Jesus Christ of Latter-day Saints (LDCS) and redirected contributions from the Government of Korea and Gavi, the Vaccine Alliance. These funds have enabled life-saving interventions across affected provinces.

Strategic partnerships have been pivotal in driving recent progress. Moving forward, UNICEF will deepen collaboration to secure joint funding and enhance operational efficiency. However, without timely and predictable financing, these hard-won gains remain fragile and risk being reversed.

Over the month of November, UNICEF received additional resources on disaster preparedness and cholera response as part of a multi-country, multi-agency proposal coordinated by the World Health Organisation (WHO), UNICEF's Eastern and Southern Africa Regional Office (ESAR) and the International Federation of Red Cross and Red Crescent Societies (IFRC). However, a substantial funding gap persists, jeopardizing the scale and speed of operations—particularly in critical areas such as Risk Communication and Community Engagement (RCCE), WASH/CATI, Health and Nutrition, Education, and Child Protection.

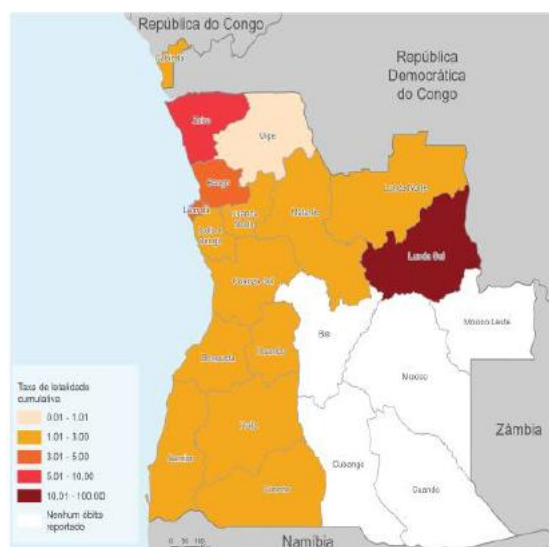


UNICEF/ANG-2025 – UNICEF staff supports water chlorination in the municipality of Namacunde – Province of Cunene.

Situation Overview and Humanitarian Needs

During the reporting period between 3 November and 2 December 2025 Angola continued to report cholera cases across 31 municipalities out of the 168 affected since the beginning of the outbreak.

- Since the onset Angola recorded 35,451 cases and 880 deaths, impacting overall 168 municipalities out of 326 spread across 18 provinces out of 21 provinces.
- During the reporting period, between 3 November and 2 December, 1,957 cases were recorded (1,069 males and 888 females), out of which children represents 42.9 per cent, nevertheless showing a substantial reduction compared to October.
- Huíla province continued to be the current hotspot with sustained numbers of cases reported in the mining areas as in the previous month.
- Uíge, starting from October, emerged as a hotspot and continued throughout the month to have high numbers of cases reported mainly in Uíge city showing, so far, a localized outbreak in highly densely populated areas of the province.



Map of Angola showing the cumulative Case Fatality Rate of cholera since the beginning. Not to scale, as of 29 November 2025.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

COORDINATION

UNICEF has worked closely with WHO and the Ministry of Health to ensure a unified, multisectoral response since the beginning of the outbreak. Coordination has now become a routine activity that facilitates when needed, a more in depth analysis of the specific situations. Coordination over the months has involved key partners that supported the response, currently UNICEF and WHO with their implementing partners are the effectively supporting the response at the National level and in the field.

UNICEF actively participates in daily Ministry-led meetings to enable rapid information sharing, joint planning, and operational decision-making. At the national level, UNICEF continues to co-lead WASH coordination meetings to sustain the response both at the national and provincial level.

Outbreak trends and hotspot evolution drive field operations. In November, UNICEF maintained a strong presence in six provinces—Cuanza Norte, Huíla, Luanda, Icolo e Bengo, Namibe and Uíge - providing technical assistance and reinforcing local coordination for an effective multisectoral response mainly on WASH and Risk Communication and Community Engagement (RCCE).

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

During the reporting period, UNICEF continued supporting provinces in coordinating community engagement, social mobilization, and Case Area Targeted Interventions (CATI).

In Uíge Province, the response focused on strengthening risk communication and community engagement (RCCE), reinforcing preventive behaviors, and assisting local authorities to contain transmission in high-risk communities. Community mobilization remained central to the intervention, with an average of 566 mobilizers visiting 23,789 households and reaching 86,124 people with cholera prevention messages. Mobilizers also distributed 9,938 liters of chlorine solution to promote safe water practices. Despite these efforts, low risk perception among families and persistent sanitation challenges continue to sustain transmission risks across several neighborhoods.

UNICEF-supported communication through local media played a critical role in amplifying prevention messages. Rádio Uíge broadcast educational spots three times per hour and daily cholera segments, reaching an estimated audience of 200,000 people across the province. Public Angolan Television Uíge ensured daily visibility of the outbreak through live reports and high-audience programs, contributing to widespread exposure to prevention guidance.

Capacity-building activities were also intensified in November, with 684 people trained across sectors, including health technicians, education officials, military personnel, religious leaders, church members, public-sector staff, and student interns. These trainings strengthened provincial capacity to deliver harmonized cholera messages, support rapid response teams, and improve coordination with local structures, although reporting challenges persist within some religious networks.

In Lunda Norte, 94 UNICEF-trained community mobilizers conducted intensive outreach across the most affected municipalities, including Cafunfo, Capenda Camulemba, Cassanje Calucala, Cuango, Luremo, and Xá Muteba, where population mobility, limited water access, and persistent sanitation challenges continue to heighten transmission risk. 29,463 people were reached with cholera prevention messages and guidance through household visits, engagement in street markets, churches, and other high-traffic community settings.



UNICEF/ANG-2025/ Alexandre Aires Fernandes In Uíge, UNICEF supports provincial health authorities to deliver lifesaving messages to vulnerable communities

In Huíla Province, UNICEF strengthened monitoring and coordination capacities through targeted training and direct technical support. Two virtual training sessions were conducted for 32 technicians coming from Jamba, Cuvango, Matala, Dongo, Capelongo, Quipungo, Quilengues, Viti Vivali and Lubango municipalities, focusing on the use of KoboToolbox and the provincial monitoring system.

In addition, seven technicians from the Provincial Health Office and the Municipal Health Directorate of Lubango received in-person training in data collection and information management, reporting, and supervisory functions at the municipal level.

UNICEF also provided close supervision and follow-up to rapid response teams operating in Lubango and Matala, ensuring that community engagement, case investigation, and water and sanitation activities were aligned with CATI protocols and provincial priorities.



UNICEF/ANG-2025/ SP Media - In Luanda, cholera-prevention activities were implemented by UNICEF's implementing partner CUAMM.

WASH/CATI

UNICEF response in the reporting period moved with the evolution of the outbreak to Uíge province. UNICEF strengthened the provincial SBC team with dedicated WASH personnel and conducted a joint high-level visit with the WASH lead to support provincial efforts to stop transmission.



UNICEF/ANG-2025/ Uíge, Major WASH cholera prevention and response training initiative.

A significant training initiative was organised in Uíge, reaching 60 key participants, including teachers, school principals, EASU/EPAS technicians, and the Head of General Services at the Hospital Geral de Uíge. The training covered critical topics such as Cholera prevention, Water Chlorination techniques, and Water Quality Monitoring. Operationally, UNICEF personnel prioritised critical zones within the Uíge municipality where populations rely on unprotected

wells near riverbeds. Interventions included installing handwashing points and establishing bucket chlorination points at Points of Collection (PoC) to ensure safe water access.

Provincial Highlights

- **Huíla & Cunene:** Huíla continued to report cholera cases across multiple municipalities throughout the month. In contrast, Cunene showed a significant decline, reporting very few cases. To address the dispersed needs in Huíla, two WASH/RCCE personnel were deployed to sustain the response. During the month of November one WASH/RCCE personnel was redeployed to support a new emerging hotspot in Malanje. In total, 127 people active in the WASH/SBC sector were trained in Huíla during November to bolster the local cholera response.
- **Lunda Norte:** The intervention at the Muchinda hotspot in Capenda Camulemba continues to demonstrate success. Following the initiation of continuous chlorination controls and the recognition of the water point manager, case numbers remain very low. ADECOS (Community Health Workers) are maintaining strong community mobilisation efforts, and the government continues to provide occasional water trucking services to support water access.
- **Malanje:** A surge in cholera cases was reported in Xandel municipality as well as in Malanje municipality. UNICEF reacted swiftly by deploying a WASH personnel (who was previously located in Huíla province) to the province to support local authorities and the Rapid Response Team in containing the outbreak.

Data & Innovation: Solstice Implementation

This month, the WASH team introduced a critical new feature to the Solstice information management platform: a survey specifically designed for CATI/Rapid Response data collection. This tool allows teams to register detailed follow-up data from cholera patient households and their immediate neighbourhoods. By linking case data directly to WASH infrastructure, this enhancement enables precise targeting of interventions at the source of infection, allowing for faster and more effective interruption of transmission chains.



UNICEF/ANG-2025/ Water treatment training in Bairro Kigima, Uíge province, to provide safe water to local population.

EDUCATION

Education continues to distribute cholera kits across the hotspot provinces for prevention and hygiene practices in schools (soap bars: 3,263; Bleach: 2,606; Hand Sanitiser: 2,085; Buckets with tap: 75; Cholera Prevention Guides: 100) to the provinces of Uíge and Lunda Norte. Through this effort, we expect to reach a total of 10,000 children (5,000 girls) across 10 schools.



UNICEF/ANG-2025/- A group of children uses a wash hand point installed in schools in the municipality of Sumbe, Seles and Quibata, in Kwanza Sul province.

Social media

The campaign includes simultaneous training in seven provinces to prepare education professionals to face health risks and protect children in schools.

<https://www.unicef.org/angola/en/stories/safe-return-school-campaign-commitment-future-angolan-children>

The Kamba com Voz Initiative is a platform designed to amplify the voices of young people and ensure their active participation in decision-making processes. Kamba Albertina Gunza worked at Colégio Deo Gracia, a school in the municipality of Kilamba, with more than 50 children and three teachers, where she combined business with pleasure (Water, Sanitation, and Hygiene)

https://www.instagram.com/p/DRmLReZDKnJ/?fbclid=IwY2xjawOmcb5leHRuA2FlbQlxMABicmlkETF2Y3VzSUtmMFhqSzZYT3d1c3J0YwZhchBfaWQPNTe0NzcXNTY5MjI4MDYxAAEe4kRiwYneWB4yC3v_j8pfnNN7mv7LCBzDFmcfk2y0Q_3WL8TJFol-yX38AfY_aem_7fqPrUuNVcxFfNhcKKA5RQ

Combating outbreaks and promoting public health are not only technical or institutional issues, but also social, community, and cultural ones.

https://www.instagram.com/p/DReUSmbDDL4/?fbclid=IwY2xjawOmcY9leHRuA2FlbQlxMABicmlkETF2Y3VzSUtmMFhqSzZYT3d1c3J0YwZhchBfaWQPNTe0NzcXNTY5MjI4MDYxAAEe-UyKUeVkrIYs7t5SulMOXZCvu6_LHYPWlmvSTKjFQDI7SVO62BFA7OUBLUg_aem_NTlRcIldX0y5YnYiikvCRQ

External Media

Health authorities in Cunene assure that cholera outbreak is under control

<https://rna.ao/rna.ao/2025/11/16/autoridades-sanitarias-no-cunene-garantem-que-surto-de-colera-esta-controlado/>

Malanje records 38 deaths caused by cholera

<https://www.jornaldeangola.ao/noticias/2/regi%C3%B5es/652435/malanje-regista-38-mortes-causadas-pela-c%C3%B3lera>

Cholera kills 38 people in Malanje province

<https://www.jornaldeangola.ao/noticias/3/sociedade/652560/c%C3%B3lera-mata-38-pessoas--na-prov%C3%ADncia-de-malanje->

Huíla prison services record 96 cases of cholera

<https://www.jornaldeangola.ao/noticias/3/sociedade/651738/servi%C3%A7os-prisionais-da-hu%C3%ADla-registam-96-casos-de-c%C3%B3lera>

Annex A - Programme results

Consolidated Programme Results

Sector indicators		UNICEF and IPs response		
RCCE		Target 2025	Total results	Progress in Percentage
# people reached with timely and life-saving information on how and where to access available services	Total	2,000,000	1,434,811	71.7%
	Girls		37,278	
	Boys		45,846	
	Women		732,405	
	Men		619,282	
# people engaged in reflective dialogue through community platforms	Total	800,000	649,936	81.2%
	Girls		97,079	
	Boys		76,300	
	Women		296,189	
	Men		180,368	
# people sharing their concerns and asking questions through established feedback mechanisms	Total	5,000	2719	54.4%
	Girls		51	
	Boys		62	
	Women		1016	
	Men		1590	
WASH/CATI				
# people accessing a sufficient quantity and quality of water for drinking and domestic needs	Total	750,000	556,157	74.2%
	Girls		154,055	
	Boys		147,938	
	Women		126,248	
	Men		127,916	
# people reached with critical WASH supplies	Total	180,000	119,225	66.2%
	Girls		34,098	
	Boys		31,595	
	Women		27,779	
	Men		25,753	
Case management, Nutrition and Oral Cholera Vaccine				
# individuals receiving treatment for cholera/acute watery diarrhea in UNICEF-supported facilities	Total	20,000	16,091	80.5%
	Girls		3,255	
	Boys		3,922	
	Women		4,158	
	Men		4,756	
# individuals receiving Oral Cholera Vaccine with UNICEF support	Total	3,500,000	3,576,444	102%
	Girls	892,500	911,993	
	Boys	857,500	876,229	
	Women	892,500	911,993	
	Men	857,500	876,229	
# individuals 6-59 months with severe wasting admitted for treatment ¹	Total	2,427	1627	67%
	Girls	1,092	732	
	Boys	1,335	895	
Child Protection				
# children who have received individual case management	Total	5000	2,421	48%
	Girls		1,205	
	Boys		1,216	
# alternative care centres strengthened	Centres	50	30	60%

¹ The indicator and target were changed during the implementation due to lack of disaggregation of data in malnutrition stabilization centers

# women, girls and boys accessing GBV risk mitigation, prevention and/or response intervention	Total	1,500,000	1,401,388	93%
	Girls			
	Women			
Education				
# students and teachers reached with critical WASH and IPC supplies	Total	570,360	455,483	80%
	Girls	285,180	214,142	38%
	Boys	285,180	241,341	42%
# schools implementing safe school protocols (infection prevention and control)	schools	300	209	69,9%
# youths trained at cholera workshops and engaged in community sensitization activities	Total	1,000	478	48%
	Girls	500	215	
	Boys	500	263	

Annex B – Funding status

Summary of funding status and pipeline

Area of intervention	Total funding requirements (US\$) for Jan-Nov 2025	Total funding received (US\$)	Funding gaps	% of funding gap
National coordination	350,000	97 170	252 830	72
Risk Communication and Community Engagement (RCCE)	1,100,000	908,130	191,870	17
WASH/Case Area Targeted Interventions (CATI)	2,100,000	1,616,316	483,684	23
Case management and nutrition	1,000,000	352,875	647,125	65
Oral Cholera Vaccine	300,000	808,230	0	0
Child Protection	300,000	169,000	131,000	44
Education - WASH in school	1,600,000	348,000	1,252,000	78
Gender/Disability	150,000	48,000	102,000	68
Operational support costs	500,000	134,735	365,265	73
Total	7,400,000	4,482,456	2,917,544	39

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